

SUMMARY OF PERFORMANCE EXIT REPORT

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|--|-----------------------------|
| Student information | Date Completed _____ |
| Student: _____ Roy _____ Date of birth: _____ Year of graduation/Exit _____ xx _____ | |
| Primary disability: _____ Aspergers _____ Secondary disabilities: _____ / _____ | |
| Permanent Address: _____ | |
| Permanent Phone: _____ | |
| Primary Language: _____ | |

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|---|
| Student's post secondary goals: |
| Employment: I will: learn what it might be like to be an athletic trainer by doing an internship with an athletic trainer. |
| Education: I will: take the courses that I need to and work hard so I can get accepted at UVM |
| Post Secondary/ Training: I will: go to college and study to become an athletic trainer |
| Independent living: I will: learn what it takes to live on my own |

Summary of Performance: Complete all that are relevant to the student. If an area is not of concern, check the NA box.

| PERFORMANCE AREA | Not Applicable | Strength | Challenge | Present level of performance (grade level, standard scores/date, strength, needs) | <u>Essential</u> accommodations and/ or assistive technology utilized in high school |
|--|----------------|----------------------------|----------------------------|--|--|
| COGNITIVE PERFORMANCE | | <input type="checkbox"/> | <input type="checkbox"/> | On grade level but struggles with social interactions | One to one staff has been helpful when out in the community. |
| Academic Performance: | | | | | |
| Reading | | x <input type="checkbox"/> | <input type="checkbox"/> | Roy is able to read text at the college level. | Roy may need help with comprehension; discussion after he reads is beneficial. |
| Math | | x <input type="checkbox"/> | <input type="checkbox"/> | On grade level | |
| Written Language | | x <input type="checkbox"/> | <input type="checkbox"/> | On grade level | Roy may write too much and benefits from being given parameters like, write 3 pages maximum. |
| Other: (note taking, time management, study skills, learning style etc.) | | <input type="checkbox"/> | x <input type="checkbox"/> | Roy experiences some difficulty in organization and time management skills. | Roy is using a planner to keep all of his schedules and events organized. |

| FUNCTIONAL AREAS | Not Applicable | Strength | Challenge | Present level of performance (strengths and needs) | <u>Essential</u> accommodations, and/or assistive technology utilized in high school |
|--|----------------|-------------------------------|-------------------------------|--|--|
| Community Employment | | x <input type="checkbox"/> | <input type="checkbox"/> | With support Roy can perform a few basic duties (basic taping, logging injury treatment info) in the training room. | A job coach that can help Roy and his supervisor get to know each other will be beneficial. |
| Post Secondary Education/ Training | | x <input type="checkbox"/> | <input type="checkbox"/> | Roy is working on achieving the goals in his transition plan and hopes to be accepted at UVM. | Roy has benefited from a teacher/mentor when in the community doing career observation. |
| Independent Living Skills | x | <input type="checkbox"/> | <input type="checkbox"/> | Roy is currently working on learning personal banking and budgeting. Roy also has great cooking skills. | Roy struggles with interactions in the community with people he doesn't know. Roy benefits from social stories prior to going out in the community. |
| Communication | x | x <input type="checkbox"/> | <input type="checkbox"/> | Roy is able to articulate his goals of going to college and becoming an athletic trainer. He struggles to ask for help in social situations when he gets confused. | Roy's antecedent when he is confused (in social settings) is an odd facial expression. When he makes this face he benefits from open questions from a staff, teacher or supervisor. |
| Other important considerations to assist in making decisions about disability determination and needed accommodations (i.e. general ability in problem solving, self-determination/ self-advocacy skills, social skills, environmental access/ mobility) | | | | | |
| Social skills | | <input type="checkbox"/> | x <input type="checkbox"/> | Currently social interactions present a challenge for Roy. Roy often will say inappropriate things but is learning strategies to help this. | Roy performs well, when he answers to a single supervisor or teacher with whom he had time to develop a relationship. He is more productive in task that do not require him to interact socially with his peers. |

To obtain a copy of transcripts, contact the school guidance office at:

To obtain a copy of Special Education documentation, contact the office of Special Education at:

STUDENT PERSPECTIVE

A. How does your disability affect your schoolwork and school activities (such as grades, relationships, assignments, projects, communication, time on task, mobility, extra-curricular activities)

B. In the past, what supports have been tried by teachers or by you to help you succeed in school (aids, adaptive equipment, physical accommodations, other services)?

C. Which of these accommodations and support has worked best for you?

D. Which of these accommodations and supports have not worked?

E. What strengths needs should professionals know about you as you enter the postsecondary education or work environment?

(Sample Letter to Accompany Summary of Performance)

TO: (My Postsecondary Service Provider)

FROM: (Student's Name)

DATE: (Date letter is written and sent)

SUBJECT: My Public School Summary of Performance Report

Attached you will find my public school Summary of Performance (SOP). I developed this summary with help from my parents, teachers, and other service providers. It contains the following sections:

1. My post-secondary goals after leaving high school.
2. Information about my disability, supports that work best for me, and accommodations that may be addressed in post-school settings.
3. Information about my high school academic achievement and functional performance.

Each section contains information that is important for my success. Please review the information carefully. I will be happy to schedule a time to visit with you about any of the information in my Summary of Performance.

Thank you for your time.

Sincerely,

(Student Name)
Street Address
City, State, Zip
Phone number
e-mail address